



## MONTANA STATE HOSPITAL POLICY AND PROCEDURE

### OCCUPATIONAL THERAPY SERVICES

**Effective Date:** August 24, 2012

**Policy #:** RTS-06

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- I. PURPOSE:** To provide procedural guidelines governing the administration of Occupational Therapy Services and its integration into the Master Treatment Plan of Montana State Hospital patients. To ensure that appropriate therapeutic occupational therapy services are provided in a timely manner.
- II. POLICY:** An Occupational Therapy consult will be initiated upon referral by a MSH Licensed Independent Practitioner (LIP). The consult will initiate an occupational therapy assessment as outlined by the LIP. The Occupational Therapy Assessment will document findings of strengths, abilities, needs, preferences, and recommended treatment in the occupational therapy domain.
- III. DEFINITIONS:**
  - A. Occupational Therapy- the therapeutic use of everyday life activities with individuals, groups, organizations, and populations for the purpose of participation in roles and situations in the home, school, workplace, community and other settings.
  - B. Significant change in course of treatment - A significant change in cognitive or behavioral status requiring a change in treatment approach.
  - C. Measurable objectives - Objectives based upon Occupational Therapy assessment summary and recommendations which are measurable, and result in a desired physical outcome.
  - D. Assigned interventions - Therapeutic Occupational Therapy interventions designed to facilitate attainment of specific goals and objectives. Interventions are recommended by an Occupational Therapist after assessment and in consultation with the treatment team.
- IV. RESPONSIBILITIES:**
  - A. Rehabilitation Department Manager - to review and approve *Occupational Therapy Services* policy and procedures and to ensure that such are followed consistently by Occupational Therapists.
  - B. Occupational Therapist – Occupational Therapist will be responsible for receiving a LIP initiated written consult order and performing assigned initial *Occupational Therapy Assessment* in a timely manner; to consult with the patient's treatment team

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on assessment recommendations; to monitor the Occupational Therapy care plan; provide documentation toward treatment objectives; and to administer an assessment at times of significant change in the course of treatment and/or upon request from treatment team.

#### V. PROCEDURES:

- A. The LIP will initiate a written consult in the Doctor Order section of the patient's medical record.
- B. Occupational Therapist will complete an Occupational Therapy Assessment within seven days of receipt of consult. An assessment will also be administered at times of significant change in the course of treatment upon request from LIP. The assessment will be placed in the medical record.
- C. This assessment will evaluate and document the patient's ability to participate in activities of daily life by considering the patient's history, goals, capacities, and needs; the activities the patient wants and needs to perform; and the environment and context in which these activities and occupations occur.
- D. The Occupational Therapy *Assessment* will include one or more occupational goals, corresponding measurable objectives, assigned interventions, and the name of the individual responsible for patient care monitoring of the Occupational care plan.
- E. The Occupational Therapist(s) assigned to the treatment team will consult with the LIP, patient and treatment team on the Occupational Therapy assessment findings and recommendations and include them in the individualized treatment plan.
- F. Occupational Therapist will administer interventions based on assessment recommendation and consultation. Interventions may include: Activities of Daily Living (ADL's), range of motion, mobility, transfers, standing and sitting balance, skin integrity, adaptive equipment, strengthening of upper extremities, sensory evaluation, and independent living and kitchen cooking/safety evaluation.
- G. Occupational Therapist will assist in educating staff, when appropriate, on how to administer exercises in addition to OT interventions.
- H. Occupational Therapist will work with the LIP, patient and treatment team to modify/update the OT intervention plan and document changes in the patient needs, goals and outcomes.

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- I. Occupational Therapist will work with LIP, patient and treatment team to transition the patient to other types or intensity of service or discontinue service when the patient has achieved goals, reached maximum benefit or does not desire to continue service.
  - J. Occupational Therapist will administer interventions as ordered by a contracted Physical Therapist for lower extremity, strengthening and ambulation. Interventions will be evaluated by Physical Therapist through follow-up consult.
  - K. Documentation will be completed on an ongoing basis and will include, at a minimum; weekly progress notes for the first sixty days of treatment and monthly progress notes thereafter.
  - L. An Occupational Therapy *Assessment* will be re-evaluated upon receipt of an order by the LIP. OT will complete re-evaluation through a patient interview and review of the documented course of treatment. An entry in the chronological progress record documenting this review will be made. A corresponding updated care plan will be completed and entered into the medical record.
  - M. Occupational Therapist is responsible to evaluate the safety and effectiveness of the Occupational Therapy interventions and services.
- VI. REFERENCES:** Montana Code- Section 37-24-103, AOTA Standards of Practice for Occupational Therapy
- VII. COLLABORATED WITH:** Associate Hospital Administrator, Medical Director, Rehabilitation Department Manager, Occupational Therapist
- VIII. RESCISSIONS:** None, new policy.
- IX. DISTRIBUTION:** All Hospital Policy Manuals
- X. REVIEW AND REISSUE DATE:** August 2015
- XI. FOLLOW-UP RESPONSIBILITY:** Rehabilitation Department Manager
- XII. ATTACHMENTS:** None

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John W. Glueckert                      Date  
Hospital Administrator

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Thomas Gray, MD                      Date  
Medical Director